

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>NEW HAMPSHIRE PRIORITIES</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00557561	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee <b>Binnie Media</b>			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 24 / 2014</b>		
Mailing Address 126 Daniels Street			Amount <b>35000.00</b>		
City Portsmouth	State NH	Zip Code 03801	Transaction ID : SE.4124		
Purpose of Expenditure radio advertising		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 21 / 2014</b>		
Name of Federal Candidate DANIEL E INNIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <b>55371.94</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y		
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>35000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>35000.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kristen Decker

[Electronically Filed]

Date

 M M M / D D D / Y Y Y Y Y Y  
**04 / 25 / 2014**

Signature